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NICARAGUA.

*Yellow fever in Leon.*MANAGUA, NICARAGUA, *October 1, 1897.*

SIR: I have the honor to inform you that I have interviewed to-day Dr. Antonio Soler, the secretary of the Nicaraguan State board of health, in regard to the cases of yellow fever that have appeared in Leon recently. Dr. Soler stated to me that he has examined the cases in Leon and pronounced them to have been genuine cases of yellow fever, and that two of the cases ended fatally. However, the cases have been sporadic ones and there is no danger that the disease will spread, the proper precautions having been taken in the beginning.

I am, sir, your obedient servant,

PAUL WIESIKE,
United States Consul.

Hon. ASSISTANT SECRETARY OF STATE.

TURKEY.

Sanitary report from Constantinople.

[Report No. 176.]

CONSTANTINOPLE, *October 13, 1897.*

According to the official sanitary reports received from the different provinces of the Turkish Empire there exists at the present an epidemic of dengue fever in Adalia on the Mediterranean coast of Asia Minor. In the other provinces public health is rather good. Only from Aleppo is announced an epizootic among oxen.

In Constantinople there exist always many cases of typhoid fever, and some of smallpox, as well as of other zymotic diseases. According to the statistics issued by the *bureau de la mortalité* of the sanitary board, there have been registered for the week ended September 28, or, according to the new style, the 10th instant, 200 deaths, of which 1 was from measles, 1 from diphtheria, 6 from smallpox, and 7 from typhoid fever.

I am glad to state that at the last sitting of the International Sanitary Commission the question about the way of building the hospitals in the lazaretto of Camaran, whether they were to be built with or without ceilings and with or without water-closets, has been settled, and the necessary orders have been given in order to have them built with ceilings and water-closets.

The inhabitants of Feriklay, a suburb near Pera, where the cemetery of the Roman Catholics is situated, have made severe complaints against existence of the cemetery in the center of that suburb. Lately the above mentioned cemetery has been enlarged. The International Sanitary Commission, to which the above-mentioned complaints have been addressed, has received from the French embassy a paper in which it is assured that the Roman Catholic cemetery is managed in such a manner that public health will never be hurt. It is said, for instance, that the cemetery is divided into four squares. In the center are the common graves, in which the corpses must be left, according to the regulations, five years, but the graves are not used for other corpses until nine years elapse. In the surrounding line of the above-mentioned square the graves are let for five years, but can be kept for

an indefinite time provided a small fee is paid. Outside of these graves are those belonging forever to the families who bury there. These four squares are separated from each other by drainpipes going to two basins, which have the waste pipes by which the overflow goes to the main sewers. In time of epidemic the director of the cemetery buys unslaked lime in order to spread on the graves.

SPIRIDION C. ZAVITZIANO,
United States Sanitary Commissioner.

UNITED STATES OF COLOMBIA.

Yellow fever in Cartagena.

CARTAGENA, *October 12, 1897.*

SIR: I have to inform you that, acting in accordance with instructions contained in paragraph 379 of Consular Regulations, I cabled the Department yesterday by way of Buenaventura: "State Department, Washington: yellow; Smyth; Cartagena, October 11."

In explanation of this cable I have to state as follows:

A week ago a case of yellow fever of the most pronounced type appeared in a house inhabited by a number of Turks and Syrians in this city. The case proved fatal and was followed by a second case in the same house, which was likewise fatal. The disease did not appear anywhere else in the city, and I therefore did not consider it "epidemic," awaiting further developments before so reporting it.

On Sunday, October 10, I visited the governor of the department in order to learn if any precautionary measure would be taken against the spread of the disease, etc. He informed me that the disease had already broken out among the troops quartered in the city, and that he was putting in operation extraordinary measures to arrest its further development. He reported 4 cases among the soldiers. Scarcely an hour after my visit to the governor I was called upon by the British consul here to go with him to take charge of the effects of a British subject of whose death he had just heard. Complying with his request, I found that the deceased had died only two hours before our arrival, that he had had no medical attendance whatever, and that the authorities were apparently ignorant of the case. I therefore questioned the widow of the deceased very closely as to the cause of death, symptoms of the disease, etc. Her answers aroused my suspicions and I insisted that a medical examination should be made before burial. We therefore notified the authorities of the death and our suspicions regarding it and returned to the house of the deceased with Dr. M. V. Montenegro, the physician to whom the governor had referred me as being the president of the board of health, and who has the reputation of having had the largest experience in the treatment of yellow fever, not only in Cartagena, but probably in Colombia. Dr. Montenegro examined the body of the deceased and declared that it was a case of yellow fever of the most pronounced type. The house was thereupon cleared of people, fumigated, and the body at once interred.

With the occurrence of the last-mentioned case I found that the disease had broken out almost simultaneously in three different localities in the city, as above described, and the necessity for the cable, required by paragraph 379, appeared imperative. Before sending it, however, I consulted with Dr. Goodman, the health officer sent by the Alabama